

This document provides information for those seeking an authorization to assist travelers to Cuba ("Travel Service Provider" or "**TSP**"), to operate charter flights to Cuba ("Carrier Service Provider" or "**CSP**"), or to forward remittances involving Cuba or Cuban nationals ("Remittance Forwarder" or "**RF**").

The Cuban Assets Control Regulations, 31 C.F.R. Part 515 (the "CACR"), administered by OFAC, prohibit all persons subject to U.S. jurisdiction from dealing in property in which Cuba or a Cuban national has an interest, unless authorized under a general or specific license from OFAC.

OFAC refers to a person who has received one or more TSP, CSP, or RF authorization(s) as a "Service Provider," pursuant to § 515.572 of the CACR. [Circular 2000](#) describes the Service Provider program.

If you wish to apply to be a Service Provider, § 515.572(c) of the CACR states the basic information that you should include in your letter of application. The supplemental guidelines and questions which follow are intended to assist you in providing the kind of full details OFAC needs in the initial application in order to avoid processing delays.

Your application, in the form of a letter, should be mailed to:

Sanctions Coordinator
OFAC-Miami Office
909 SE 1 Ave. # 736
Miami FL 33131.

Associated documents for use in making application are:

[The Cuban Assets Control Regulations](#) and
[Circular 2000](#)

Feel free to contact the OFAC-Miami Office at (305) 810-5140.

Application Guidelines: Requirements for all Service Provider Applicants

In broad terms, the Office of Foreign Assets Control ("OFAC") requires that you, as an applicant to be a Service Provider, identify yourself in writing, name the type of authorization you seek, and state how you would comply with the [Cuban Assets Control Regulations](#), 31 C.F.R. Part 515 (the "CACR"). What is required in an application follows generally the requirements in § 515.572 of the CACR.

Please note that OFAC will conduct a full federal, state, and local law enforcement background investigation of each owner, significant shareholder, director, and manager of an applicant prior to granting authorization. The information below is needed in part for the background investigation to determine your suitability and fitness for an authorization.

All applicants must provide complete information for all 3 points below:

A. Written affirmation of non-discrimination.

The required affirmation may be made using this language:

I, [the applicant], hereby affirm and demonstrate through my actions that I do not participate in any discriminatory practices engaged in by the Cuban government against certain residents and citizens of the United States. For example, I do not charge discriminatory rates for air travel or require payment for services, such as hotel accommodations and meals, not desired, planned to be utilized, or actually utilized based on such characteristics as race, color, religion, sex, citizenship, place of birth, or national origin.

B. The applicant's corporate or business information: (## 1-9)

1. Current address, telephone number, tax payer identification number, and name of the official responsible for the applicant's services.
2. All current and former names (including trade names) and addresses (including branch offices) of your business.
3. Address of principal place of business and all branch offices.
4. Complete information concerning city, county, state or federal licenses held since 1988 relevant to the services covered by the license application, including information on denial, suspension, or cancellation of a license;
5. Copies of any bylaws/articles of incorporation, partnership agreements, management agreements, or other documents pertaining to the organization, ownership, control, or management of the applicant.
6. Financial statements and/or annual reports, if any, that you have already prepared for your business.
7. Copies of any foreign contracts, agreements, licenses, or authorizations entered into or granted since 1988 relating to the provision of services of the type covered by your application.
8. Information concerning anticipated foreign contracts, agreements, licenses, and authorizations related to provision of services covered by your license application.
9. A list of all bank accounts (including account name, number, and location) maintained for use by the business entities covered by your license application.

C. The applicant owners'/employees' information: (## 10-16)

10. Identity of and ownership percentage share of each shareholder or partner.
11. Complete name, including, if any, middle name and patronymic and matronymic name, of each officer, director, and stockholder.

12. Place and date of birth of each officer, director, and stockholder.
13. Social Security Number of each officer, director, and stockholder.
14. Complete home address and telephone number of each officer, director, and stockholder.
15. Citizenship of each officer, director, and stockholder and, if not a U.S. citizen, type of resident status in the United States including date on which resident status was granted and any identifying number issued by the U.S. Immigration and Naturalization Service.
16. If the applicant or any officer, director, or stockholder has ever been convicted of a violation of Federal, state, or local law, other than minor motor vehicle violations, a description of all details and circumstances concerning the conviction.

Please note: Your answers to all 16 questions, in order to be complete, must be phrased as complete sentences, repeating the relevant points rather than one word answers. For example, "No officer, director, or stockholder of [the company's name] has ever been convicted of a violation of Federal, state, or local law." (Please do not respond simply: "None".)

In addition to responding to sections A, B, and C, above, you must also respond to the additional requirements set forth in the specific TSP, CSP, and/or RF guidelines, which follow.

Application Guidelines: Travel Service Provider

An applicant to be a TSP must provide:

- A. Completed "Requirements for all Service Provider Applicants"; and
- B. TSP forms and procedures, described as follows:

You must describe in detail the forms and procedures you would use in conducting business to ensure compliance with the Service Provider program. In essence, you are representing to OFAC that you will use the process you describe to ensure compliance with the Service Provider program, and OFAC, in reliance upon your representations, may authorize you to engage in TSP transactions. Describe in detail the procedures and the documents that you would use in connection with each of these areas of concern. You may wish to tell us in a narrative form how you would conduct your business.

- **Each person to whom you offer services must be authorized by OFAC or qualify as a "fully hosted" traveler.** Explain in your own words who qualifies under a general license. Describe what specific licenses are available under the CACR. Explain in detail how you would ensure that the person qualifies under a general license. Discuss the limited services you may provide someone who is "fully hosted."
- **Each TSP-related transfer of funds you make must be authorized.** Explain how, for monies due to Cuba for visas, passports, hotel accommodations, car rentals, etc., you would use a third-country bank to transfer those funds. State if you would transfer such funds to another Service Provider for further transfer to Cuba through a third-country.
- **You must keep records for a period of 5 years and make reports which are complete and timely.** Explain how would you process travel for a person whom you knew to qualify under a general license or who had a specific license. Include a sample of the document(s) a customer would fill out (OFAC's suggested formats or your own).

Note: OFAC's suggested formats for ensuring that a traveler is authorized and for TSP reporting are attachments to Appendix I of [Circular 2000](#).

Application Guidelines: Carrier Service Provider

An applicant to be a CSP must provide:

- A. Completed "Requirements for all Service Provider Applicants".
- B. CSP-related details of activity, knowledge, and ability.
 - Describe the level of activity you seek to undertake as a CSP, including per week figures for the number of flights (the "Flights") and passenger volume (including business plans or draft contracts).
 - Document your working knowledge of Department of Transportation, Customs, and OFAC rules related to the operation of the Flights. Include evidence of training, classroom work, or work experience (with dates and references) in directly related areas.
 - Certify to your current ability to be responsible for all of the financial requirements inherent in the operation of the Flights. Include a detailed estimate of each relevant expense in the operation of the Flights. Include a written affirmation of your ability to cover such expenses at this time (this may include further evidence of this ability).
 - Document that you have sufficient data processing capacity to satisfy those needs inherent in the operation and oversight of the Flights.
- C. CSP forms and procedures:

You must describe the forms and procedures you would use in conducting business to ensure compliance with the requirements of the Service Provider program. In essence, you are representing to OFAC that you will use a process to ensure compliance with the Service Provider program, and OFAC, in reliance upon your representations, may authorize you to engage in CSP transactions. Describe in detail the procedures and the documents that you would use in connection with each of these areas of concern. You may wish to tell us in a narrative form how you would conduct your business.

 - **Each person to whom you offer services must be authorized by an OFAC specific or general license.** Explain in your own words who qualifies under a general license. Describe what specific licenses are available. Explain in detail how you would ensure that a person qualifies under a general license.
 - **Each transfer of funds you make must fall within your CSP authorization.** Explain how, for monies due to Cuba for landing fees, etc., you would use a 3rd country bank to transfer funds. State if you would transfer such funds to another Service Provider for transfer to Cuba through a 3rd country.
 - **You must keep records for a period of five years and make reports which are complete and timely.** Explain how would you process travel for a person whom you knew to qualify under a general license or who had a specific license. Include a sample of the document(s) a customer would

fill out (OFAC's suggested formats or your own). Note: OFAC's suggested formats for ensuring that a traveler is authorized and for CSP reporting are attachments to Appendix II of [Circular 2000](#).

Application Guidelines: Remittance Forwarder

An applicant to be a RF must provide:

- A. Completed "Requirements for all Service Provider Applicants".
- B. Information about the scope of your proposed RF operation.
- Your application must state whether you seek to conduct RF-related transactions from your offices or through an agent(s).
- For a person seeking to work through an agent(s), describe how the transactions conducted by your agent(s): (i) are clearly identified for the client as yours and not the agent's; (ii) are subject to your review, cancellation, and control for the purposes of the Cuban Assets Control Regulations and the Service Provider Program; and (iii) are ultimately your responsibility - you are liable for the transactions conducted through your agent(s).
- C. RF procedures, described as follows:

You must describe in detail the procedures you would use in conducting business to ensure compliance with the requirements of the Service Provider program. In essence, you are representing to OFAC that you will use the process you describe to ensure compliance with the Service Provider program, and OFAC, in reliance upon your representations, may authorize you to engage in RF transactions. Describe in detail the procedures that you would use in connection with each of these areas of concern. You may wish to tell us in a narrative form how you would conduct your business.
- **Each person to whom you offer services must be authorized by an OFAC specific or general license.** Explain in your own words the terms and conditions of, and who qualifies under, the OFAC general licenses for immigration, family, and personal remittances. Explain in detail how you would ensure that the person qualifies under a general license. Describe what specific licenses are available.
- **Each RF-related transfer of funds you make must be authorized by an OFAC specific or general license.** Explain how, for monies due to Cuba related to RF transactions, you would use a third-country bank to transfer those funds. State if you would transfer such funds to another Service Provider for further transfer to Cuba through a third country. Explain how, for monies that go to Cuba, you would ensure (1) that the funds are delivered to the intended recipient in Cuba, and (2) that the delivery will occur in a timely fashion.
- **You must keep records for five years and make reports which are complete and timely.** Explain how you would process a remittance. Include reference to the required OFAC form "Cuba Remittance Affidavit." Note: OFAC's suggested format for reporting is an attachment to Appendix III of [Circular 2000](#).